

Department of Emergency Management 1011 Turk Street, San Francisco, CA 94102

Phone: (415) 558-3826 Fax: (415) 558-3869



Mary Ellen Carroll **Executive Director**

CUSTODIAN OF RECORDS REQUEST FOR DISPATCH RECORDS INSTRUCTIONS

(San Francisco Sunshine Ordinance, Administrative Code §67.2.seq.)

Dear Requestor:

On the attached Request for Records Form, fill out each line as applicable. Specifically identify the information

you are attempting to obtain in order for your request to be processed.
The following information must be supplied:
☐ Date of your request
☐ Name, address and contact telephone number
☐ CAD or police case number (if available)
☐ Date of the incident
\square Location of the incident – if requesting address history, please list the date range.
\square Any other identifying information (i.e. requests for all calls to a particular location) .
☐ Enclose payment if applicable If you do not have all of the above required information, please fill out the form to the greatest extent possible. Incomplete requests may delay our ability to process the request in a timely manner.
We can use a police case number to locate your CAD record; however, we do not have access to San Francisco Police reports. For copies of a police report, contact SFPD – Record Management at www.sanfranciscopolice.org . You may also call 415.575.7232 or email them at sfgov.org .
If your request requires a payment, we currently accept cash, check, or money order. To avoid delays in receipt of your request, please include payment in the exact amount due with the request form.
Fees Schedule for Non-City & County Entities: (City & County Departments DO NOT use this request form) Audio - \$35 per CD (To avoid a delay in receipt of records, please include payment with request) Please pay the exact amount due. We cannot make changes or accept partial payments Other records - no charge if under 100 pages, \$0.10 per each additional page.
WE CANNOT PROVIDE RUSH SERVICE. Requests are processed in the order received. While we process requests as quickly as possible, we have up to 10 calendar days to accept or deny the request. It is not necessary to call for the status of your request.
You may email a completed request to dem.records@sfgov.org . Please note, we cannot return records by email at this time. We will mail the records to the address you list on the form.

You may also fax the form to us at (415) 558-3869 or mail to:

Department of Emergency Management Attn: Custodian of Records 1011 Turk St

San Francisco, CA 94102



SAN FRANCISCO DEPARTMENT OF EMERGENCY MANAGEMENT

Custodian of Records

Request for Dispatch Records (San Francisco Sunshine Ordinance, Administrative Code §67.1.seq.)

Date of Request:	NOTE <mark>: No Same Day Service Available</mark>
Requestor Name:	
Address:	
	Telephone:
Records Requested:	
CAD Printout	☐ Telephone Audio (\$35) ☐ Radio Audio (\$35)
Other (specify): _	
CAD Number:	Case or Incident number:
Date of incident:	Time of incident:
Incident Location:	
Other identifying info	rmation or detail (be specific):
Please note: We curre	ently cannot produce records in digital format or by email.
	to inspect records, please mail the records to the address above, I understand I must pay any ees before the department will send the records.
Headquarte	to pick up copies of the records from the Department of Emergency Management ers. Please advise me when the record are ready. I understand that I must pay any applicable the Department will release the copies to me.
	the records to the address above. I understand that I must pay any applicable fees before the t will send the records.
Fees Schedule for Non-City & County Entities: (City & County Departments DO NOT use this request form) Audio - \$35 per CD (To avoid a delay in receipt of records, please include payment with request) Please pay the exact amount due. We cannot make changes or accept partial payments Other records - no charge if under 100 pages, \$0.10 per each additional page.	
For Office Use Only	
Date Completed: Comments:	Completed Bv: